RECEIVED MAY 1 9 2008

CHECK ON THE PROPERTY OF THE P		FORM	CTATEMENT
CHECK ONE:			STATEMENT
This is an initial* Statement of Organization	Reset Form	DR-1	OF ODGANIZATION
This is an amended* Statement of Organization	ACSEL OIL	(Rev. 01/2006)	ORGANIZATION
*An initial Statement of Organization *An initial Statement of Organization must be filed within 10 days of the commaking expenditures, or incurring indebtedness exceeding \$750. Among the command of t	ommittee's accepting contributions.	For Office Use C	Only
a change Penalties may be imposed for late file to a late file to	ments must be filed within 30 days of	Indexed	
committee that exceeds \$750 in activity for another in the internal of Organiz	ation. A candidate with an open	Audited	
United the second of th	ouant I	Computer	
COMMITTEE NAME ↓ ↓ (A candidate's committee must include the			
14	ie candidate's last name in the name of	the committee.)	
IMPORTANT: Indicate type of committee you are reporting for:	ISOr		
(1) Statewide/Legislative/ Judge Standing for:			
(1) Statewide/Legislative/Judge Standing for Retention Candidate (5) County Candidate (6) City Candidate (7) School Board or Other	2)Statewide PAC (3)State Party (4)	County Central Co	mmittee
(5) County Candidate (6) City Candidate (7) School Board or Other (10) School Board or Other Political Subdivision PAC (11) Local Ba	Political Subdivision Candidate (8)	County PAC (9)C	ity PAC
(1.7)	anot issue (including committee invol	ved in multiple city	county ballot issues)
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (manda	tons except for a	
Name + Julia Minnide	Name ↓ ↓	tory except for a ca	ndidate's committee)
Mailing Address ↓ ↓ 6			
2035 Gran	Mailing Address ↓ ↓		
City, State ↓ ↓ Zip Code ↓ ↓	City, State ↓ ↓ Zip Code ↓ ↓		
- 141 Ayr, Va 20854			
Phone (641) 464-2183			
	Phone ()		
e-Mail	e-Mail		
INDICATE PURPOSE OF COMMITTEE - Check One Box ☐ Add Comment or description:	ocate for/against candidate(s) Adv	ocate for ballot incur	
Comment or description: All Candidates Enter:	L.i Adv	ncate against hallot.	icoup/a)
Office Sought: Ringgald Co Supervisor	County/Local Candidates an	Local Ballot Com	mittoes Enter
Supervisor			
Political Party (if applicable) DemacraT	County: Ringar/ (If active in multiple ballot issue	ologione all al II i	
District:	(" delite in manapic ballot issue	/	of counties
Year Standing for Election: 2008	Date of Election: Jake	3 2008	
Bank Account Name	Candidate name & Address or Por	am4 E-4:4 . /DAO - 17	
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Bank Account Name ↓↓	Candidate name & Address or Par ↓ ↓ Affi	ent Entity (PACs, if liate, or Sponsor	applicable),
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Personal Account Name of Financial Institution/type of Account Personal Account Personal Account Mailing Address + 203 S Grant City + State + Zip + MI Nyr Yu 50854	Mailing Address ↓ ↓ City ↓ ↓ S Phone () e-Mail	liate, or Sponsor	
Personal Account Name of Financial Institution/type of Account Personal Account Name of Financial Institution/type of Account Mailing Address + 203 S Grant City + State + Zip + /m/ Hyr Fu SUSSY STATEMENT OF AFFIRMATION: By filling this document the committee affir	Mailing Address City Phone () e-Mail ms the following:	tate ↓ ↓ 2	üp ↓ ↓
Personal Account Name of Financial Institution/type of Account Personal Account Name of Financial Institution/type of Account Mailing Address + 203 S Grant City + State + Zip + /m/ Hyr Fu SUSSY STATEMENT OF AFFIRMATION: By filling this document the committee affir	Mailing Address City Phone () e-Mail ms the following:	tate ↓ ↓ 2	üp ↓ ↓
Personal Account Name Personal Account Name of Financial Institution/type of Account Personal Account Mailing Address + 203 S Grant City + State + Zip + Mailing Address + State + Zip + Mailing Address + The Committee and all persons connected with the committee understand that rules in Chapter 351 of the Iowa Administrative Code.	Mailing Address City Phone () e-Mail	tate ↓ ↓ Z	üp ↓ ↓ and the administrative
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